

| RECEIVED AND FILED<br>DATE December 3, 2019                                                     | 4 |
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|                                                                                                 | _ |
| ALISON LUNDERGAN GRIMES<br>SECRETARY OF STATE<br>COMMONWEALTH OF KENTUCK<br>BY LANDIE CHALLINGS |   |

## COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES SECRETARY OF STATE

## NOTICE OF CITY RECLASSIFICATION

Pursuant to the Municipal Reclassification Reform Act, House Bill 331 (Regular Session 2014), which is codified at KRS 81.005, cities must file written notice of reclassification with the Office of Secretary of State before January 1, 2015. Any city that fails to comply with the filing requirement will be barred from receiving state moneys until the notice of reclassification is submitted.

| Please complete this for                               | m and send to the Office of the S                                  | ecretary of State <u>b</u> | efore January 1, 20 | 15.                                |  |  |
|--------------------------------------------------------|--------------------------------------------------------------------|----------------------------|---------------------|------------------------------------|--|--|
| Name of City:                                          | City of Crofte                                                     | ON                         |                     |                                    |  |  |
| Year of Incorporation:                                 | 1873                                                               |                            |                     |                                    |  |  |
| New Classification: (a                                 | check one)                                                         |                            |                     |                                    |  |  |
|                                                        | First Class (formerly Classification 1)                            |                            |                     |                                    |  |  |
|                                                        | Home Rule Class (formerly C                                        | lassifications 2 th        | rough 6)            |                                    |  |  |
| Form of Government:                                    | it: (check one)                                                    |                            |                     |                                    |  |  |
| П                                                      | Mayor - Alderman (First Class Classification only)                 |                            |                     |                                    |  |  |
| Ħ                                                      | City Manager (KRS 83A.150)                                         |                            |                     |                                    |  |  |
| 7                                                      | Mayor - Council (KRS 83A.130)                                      |                            |                     |                                    |  |  |
| Ħ                                                      | Commission (KRS 83A.140)                                           |                            |                     |                                    |  |  |
|                                                        | Consolidated Local Government or CLG (KRS 67C, example Louisville) |                            |                     |                                    |  |  |
|                                                        | Urban County Government or UCG (KRS 67A, example Lexington)        |                            |                     |                                    |  |  |
| Submitted by:                                          | Shered Benum                                                       |                            |                     |                                    |  |  |
| •                                                      | Title: City Clerk                                                  |                            |                     |                                    |  |  |
|                                                        | Date: 1/2-3-6                                                      | wi <del>j</del>            | <b>→</b>            |                                    |  |  |
| Type of election for cit                               | y officials: <i>(check one)</i>                                    | Partisan                   | Non-Partisan        | J.W.                               |  |  |
| If non-partisan, does your city waive the primary? Yes |                                                                    | Yes                        | No                  |                                    |  |  |
| After printing, complete t                             | he form, sean and e-mail, or send v                                | via mail or fax to:        | Frankfort, KY 4060  | son<br>c, State Capitol, Suite 152 |  |  |